

Notre Dame High School Tutor Request Form

Date: _____ Name: _____

Home Phone: _____ Cell Phone: _____

E-Mail Address: _____ Do you check your e-mail? _____

Have you received tutoring in the past? _____

If yes – when? _____

Class Status: Freshmen _____ Sophomore _____ Junior _____ Senior _____

Subject(s) needing tutoring:

The information provided will assist in developing an appropriate plan for helping you in this class. Please answer all of the following questions.

Is this your first time taking this class? _____

Are you having difficulty taking notes? _____

Have you approached your teacher for assistance? _____

Are you completing all assignments for this class? _____

Are you turning all assignments in on time? _____

Do you enjoy this class? _____

Do you know how to study for class? _____

How many hours do you spend studying for this class? _____

Present grade in the class? _____

Indicate times that you are available for tutoring. _____ Before school,
_____ After School, _____ During Lunch – Lunch Period _____

Class Schedule:

Hour	Class (subject)
1st	
2nd	
3rd	
4th	
5th	
6th	
7th	
8th	